

**MOTOROLA**

FAX TRANSMITTAL SHEET

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9 Number of Pages (Including this page)

Date: June 30, 2004

To: Examiner Gesesse, T. - Group 2684

Location: United States Patent and Trademark Office

Fax No.: 703-872-9306

From: Steven A. May (Registration No. 44,912)

Subject: Serial No. 09/516,134 -Pan et al.

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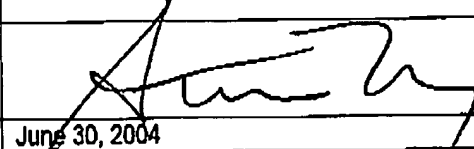
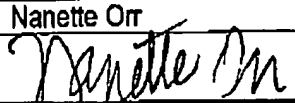
**MESSAGE:**

Enclosed herewith, please find a RESPONSE Office Action and REQUEST FOR EXTENSION OF TIME for filing in the below-identified application.

**PLEASE GIVE THESE PAPERS TO:**

EXAMINER:	Gesesse, T.
GROUP ART UNIT:	2684
SERIAL NO.:	09/516,134
FILED:	03/01/2000
INVENTOR:	Pan et al.
ATTORNEY DOCKET NO.:	CE08539R

PTO/SB/21 (08-00)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/516,134	
		Filing Date	03/01/2000	
		First Named Inventor	Pan et al.	
		Group Art Unit	2684	
		Examiner Name	Gesesse, T.	
Total Number of Pages in this Submission		4	Attorney Docket Number	CE08539R
<b>ENCLOSURES</b>				<b>(check all that apply)</b>
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below) <input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Response to Notice of Non- Recordation of Document
Remarks				
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>				
Firm or Individual	Steven A. May		Registration No.	44,912
Signature				
Date	June 30, 2004			
<b>CERTIFICATE OF TRANSMISSION</b>				
I hereby certify that this correspondence is being facsimile transmitted to Commissioner for Patents, P.O. Box 1450, Alexandria, VA, on the date listed below:				
Typed or printed name	Nanette Orr			
Signature			Date	June 30, 2004

<b>FEE TRANSMITTAL</b>  Patent fees are subject to annual revision		<b>Complete if Known</b>	
		Application Number	09/516.134
		Filing Date	03/01/2000
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TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.	CE08539R

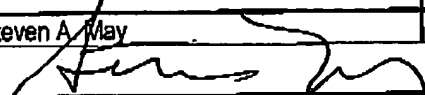
  

<b>METHOD OF PAYMENT</b>  1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number: <b>50-2117</b> Deposit Account Name: <b>Motorola, Inc.</b>  <input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	<b>3. ADDITIONAL FEES</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1063</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>205</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1610</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Steven A. May	Registration No.	44,912
Signature		Telephone	(847) 578-3635
		Date	June 30, 2004